Mass Animal Fund Veterinary Provider Scope of Services

Participating veterinarians must:

- Be licensed to practice veterinary medicine and be employed by a veterinary clinic, hospital, shelter within the state they are licensed for.
- Be compliant with state-mandated reimbursement documentation requirements and procedures; and maintain open communication with the coordinator of the Mass Animal Fund about their participation in the Program.
- Be willing to assist in advocating for clients to contribute to the Mass Animal Fund tax check-off
- Understand that the needs of the Program will vary month to month and year to year and will be contingent upon the local population and clients' choice of veterinary service provider.
- Provide spay/neuter services –admit an animal for an initial exam, vaccinations, and surgery all on the same day whenever possible.
- Be willing to schedule spay/neuter surgery within 60 days of any voucher recipient's request for services.
- Provide the following to cats/dogs under the Program: DHPP/FVRCP and rabies vaccines, anesthesia and pain management medications, spay/neuter surgery, IV fluids (if necessary), blood tests (if necessary), additional medications (if necessary), and additional supplies (if necessary);
- Provide the above at no cost to the Program participant and for a flat-fee reimbursement from the Mass Animal Fund, using the following pay schedule which is inclusive of the entire surgery and related treatment including vaccines associated with the surgery:

The following Tier system shall be followed for reimbursement of the Contractor:

Tier I	Cat neuter	\$75
Tier II	Cat spay/small dog (<50lbs.) neuter	\$150
Tier III	Small dog (<50lbs.)Spay/ Large dog neuter (>50lbs.)	\$225
Tier IV	Big dog (>50 lbs.) spay	\$300

Providers may ask for a next tier reimbursement for pyometra surgery. In the case of a cat/small dog (<50lbs.) with pyometra, providers may ask for a reimbursement rate of \$300. In the case of a big dog (>50lbs.) with pyometra, providers may ask for a reimbursement rate of \$450.

Providers may ask for a next tier reimbursement for a dystocia/spay surgery. Please note a spay must be performed at the time of surgery to be eligible for reimbursement. In the case of a cat/small dog

(<50lbs.) with dystocia, providers may ask for a reimbursement rate of \$300. In the case of a big dog (>50lbs.) with dystocia, providers may ask for a reimbursement rate of \$450.

Providers may ask for the equivalent spay reimbursement amount for abdominal cryptorchid males. In the case of an abdominal cryptorchid male cat, providers may ask for the reimbursement rate of \$150. In the case of an abdominal cryptorchid male dog (<50 lbs.), providers may ask for \$225. In the case of an abdominal cryptorchid male dog (>50 lbs.), providers may ask for \$300.

Providers may ask for additional reimbursements for the following complications, limit 1 per surgery:

- 1. Inguinal cryptorchid additional \$25 reimbursement
- 2. Older than 5 years (if additional bloodwork is deemed necessary) additional \$25 reimbursement
- 3. Extra Large (+100 lbs.) additional \$25 reimbursement
- 4. Estrus additional \$25 reimbursement
- 5. Obese (must state body condition score) additional \$25 reimbursement
- 6. Parasite treatment for active infestation additional \$10 reimbursement, unless Reimbursed by owner at time of surgery.

To receive any of the additional reimbursement amounts, the contractor must write the complication or reason on the voucher under "additional services needed". The additional amount must also be indicated on the invoice. Limit 1 reimbursement increase per surgery.

Animal Control Officers ("ACOs") shall distribute vouchers issued by the Mass Homeless Animal Prevention Fund ("Department") to an animal shelter/rescue in need of free spay/neuter services for a homeless animal, or may give them to a family they have identified as low-income with barriers to financing a spay/neuter for their pet, or may use the voucher themselves to obtain spay/neuter services for an animal in their municipal animal control facility. The Contractor shall accept these vouchers to perform the services as outlined above and in Attachment B: Request for Responses.

On the day of surgery, the voucher recipient shall present the physical voucher to the Contractor, who after the services have been performed will be able to submit the voucher, along with an invoice, for payment from the Department. The Department reserves the right to withhold payment until the Contractor has provided satisfactory documentation of services.